

BJN 127 (rev. 1/14)

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS

In Re:

H Melton Ventures, LLC

Debtor(s)

§
§
§
§
§
§

Case No.: 17-43922

Chapter 11

APPLICATION FOR PAYMENT OF UNCLAIMED FUNDS

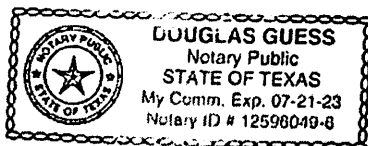
Comes now the undersigned, to make application for an order directing payment of unclaimed funds now on deposit in the Treasury of the United States. Claimant is a X creditor debtor (check one) in the above captioned bankruptcy case and on whose behalf these funds were deposited.

1.	Name of Claimant(s)	1801 Division, Inc.
2.	Name and Title of Authorizing Officer or Representative (If Claimant is an individual, skip to Question No. 3)	Frank Ricupati President of 1801 Division, Inc.
3.	Current Mailing Address	Attn: Frank Ricupati 9853 Milkweed Lane, Fort Worth, TX 76177
4.	Telephone Number	(713) 202 4910
5.	SS# (last 4 digits only) or EIN #	26-0379139
6.	Amount Being Claimed	\$27,425.38

I, Frank Ricupati, do hereby state under penalty of perjury that I am legally entitled to claim these funds for whom the unclaimed funds were deposited into the treasury in the above referenced bankruptcy case. I certify to the best of my knowledge that all information submitted in support of this claim is true and correct.

Date 3/15/23 Frank Ricupati
Claimant Signature

Subscribed and Sworn to Before Me this 15 day of March.



Douglas Guess
Notary Public
In and for the State of Texas
My commission expires 7/21/23

CERTIFICATE OF SERVICE

In accordance with 28 U.S.C. § 2042, the undersigned hereby certifies that on the date designated below, a true and correct copy of the foregoing application with all required attachments was mailed to:

Office of the United States Attorney
Attn: Unclaimed Funds
1100 Commerce Street, 3rd Floor
Dallas, TX 75242

Date: 3/15/23


Claimant's Signature

MARILYN D. GARNER
SBOT No. 07675550
2001 East Lamar Blvd., Suite 200
Arlington, Texas 76006
(817) 505-1499 (817) 549-7200 (FAX)

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE NORTHERN DISTRICT OF TEXAS
FORT WORTH DIVISION

IN RE:	§	
	§	
H Melton Ventures, LLC	§	17-43922-ELM-7
	§	
DEBTOR(S)	§	

NOTICE BY CHAPTER 7 TRUSTEE TO DEPOSIT UNCLAIMED FUNDS

TO THE HONORABLE EDWARD L. MORRIS, U.S. BANKRUPTCY JUDGE:

Transmitted herewith is a check for deposit into the court's unclaimed funds registry as unclaimed property for the above referenced chapter 7 case. I hereby certify that a period of ninety days has elapsed since the issuance of these funds and the disbursement check(s) have not been negotiated.

Name: 1801 Division, Inc.

Address: 777 Main Street, Ste 600
Fort Worth, TX 76102

Amount: \$27,425.38

Respectfully submitted,

/s/ Marilyn D. Garner
Marilyn D. Garner, Trustee
SBOT No. 07675550
2001 East Lamar Blvd., Suite 200
Arlington, Texas 76006
(817) 505-1499 (817) 549-7200 (FAX)

CERTIFICATE OF SERVICE

I certify that a true and correct copy of the **NOTICE BY CHAPTER 7 TRUSTEE TO DEPOSIT UNCLAIMED FUNDS** was forwarded by electronic transmission to the United States Trustee, on this 10th day of August 2022.

/s/ Marilyn D. Garner
Marilyn D. Garner


U.S. Courts Unclaimed Funds Locator

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Court / TXNB

Creditors | 1

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	Court	Case	Creditor Name	Debtor Name	Amount
	TXNB	17-43922	1801 Division, Inc.	H Venturesllc	\$27,425.38

Fill in this information to identify the case:

Debtor 1 H MELTON VENTURES, LLC

Debtor 2
(Spouse, if filing) _____

United States Bankruptcy Court for the: Northern District of Texas

Case number 17-43922

Official Form 410

Proof of Claim

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

Part 1: Identify the Claim

1. Who is the current creditor?	<u>1801 DIVISION, INC.</u> Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor _____	
2. Has this claim been acquired from someone else?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____	
3. Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should notices to the creditor be sent? <u>Behrooz P. Vida</u> Name <u>3000 Central Drive</u> Number Street <u>Bedford TX 76021</u> City State ZIP Code Contact phone <u>817-358-9977</u> Contact email <u>behrooz@vidalawfirm.com</u>	Where should payments to the creditor be sent? (if different) <u>Frank Ricupati, President</u> Name <u>777 Main Street #600</u> Number Street <u>Fort Worth TX 76102</u> City State ZIP Code Contact phone <u>(817) 887-8460</u> Contact email <u>fricupati@ecimanagementgroup.com</u>
Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____		
4. Does this claim amend one already filed?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Claim number on court claims registry (if known) <u>6</u> Filed on <u>01/30/2018</u> MM / DD / YYYY	
5. Do you know if anyone else has filed a proof of claim for this claim?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing? _____	

Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor? ☒ No
☐ Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: _____

7. How much is the claim? \$ 139,089.74 Does this amount include interest or other charges?
☐ No
☒ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

8. What is the basis of the claim? Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.
Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).
Limit disclosing information that is entitled to privacy, such as health care information.
Post-petition Rent, Lease Agreement and State Court Judgment

9. Is all or part of the claim secured? ☒ No
☐ Yes. The claim is secured by a lien on property.
Nature of property:
☐ Real estate. If the claim is secured by the debtor's principal residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim*.
☐ Motor vehicle
☐ Other. Describe: _____
Basis for perfection: _____
Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)
Value of property: \$ _____
Amount of the claim that is secured: \$ _____
Amount of the claim that is unsecured: \$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.)
Amount necessary to cure any default as of the date of the petition: \$ _____
Annual Interest Rate (when case was filed) _____ %
☐ Fixed
☐ Variable

10. Is this claim based on a lease? ☐ No
☒ Yes. Amount necessary to cure any default as of the date of the petition. \$ 139,089.74

11. Is this claim subject to a right of setoff? ☒ No
☐ Yes. Identify the property: _____

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)? ☐ No ☒ Yes. Check one:

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

	Amount entitled to priority
<input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$ _____
<input type="checkbox"/> Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).	\$ _____
<input type="checkbox"/> Wages, salaries, or commissions (up to \$12,850*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).	\$ _____
<input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$ _____
<input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$ _____
<input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)(<u>2</u>) that applies.	\$ <u>2,500.00</u>

* Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment.

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

- ☒ I am the creditor.
☐ I am the creditor's attorney or authorized agent.
☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.
☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 01/18/2021
MM / DD / YYYY

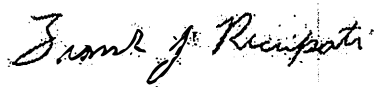
/s/ Frank Ricupati
Signature

Print the name of the person who is completing and signing this claim:

Name	Frank	Ricupati	
	First name	Middle name	Last name
Title	President		
Company	1801 Division, Inc.		
	Identify the corporate servicer as the company if the authorized agent is a servicer.		
Address	777 Main Street #600		
	Number	Street	
	Fort Worth	TX	76102
	City	State	ZIP Code
Contact phone	(817) 887-8460		Email fricupati@ecimanagementgroup.com

I, Frank Ricupati, have the authority to receive funds on behalf of 1801 Division, Inc.

Regards,

A handwritten signature in black ink that reads "Frank J. Ricupati". The signature is written in a cursive style with a vertical line through the middle of the name.

Frank J Ricupati, President

1801 Division, Inc.

9853 Milkweed Lane

Fort Worth, TX 76177

